

Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR

FEB 24 2014

FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014

NOTICES AND REPORTS ON WELLS

5. Lease Serial No. NMSF078385 **BUREAU OF LAND MANAGEMENT**

SUNDRY N Do not use this f abandoned well.	orm for proposals to d Use Form 3160-3 (APD)	rill or to re-enter and for such proposal	anagem 🤃 🖽	ndian, Allottee or T	Tribe Name	
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7. If Unit of CA/Agreement, Name and/or No.		
Type of Well Oil Well				8. Well Name and No. Florance P 3S & Florance P 39A		
2. Name of Operator BP America Production Company				9. API Well No. 3004532427 & 3004521811		
3a. Address 501 Wesliake Park Blvd. Houston, TX 77079	.)	10. Field and Pool or Exploratory Area Basin Fruitland Coal, Blanco Mesaverde				
4. Location of Well <i>(Footage, Sec., T.,R,M., or Survey Description)</i> Sec 35 T30N R08W, 1745 FSL & 785 FEL, 1745 FSL & 810 FEL				11. County or Parish, State San Juan, NM		
12. CHEC	K THE APPROPRIATE BOX(E	S) TO INDICATE NATURI	OF NOTICE, RE	PORT OR OTHER	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent ✓ Subsequent Report	Acidize Alter Casing Casing Repair Change Plans	Deepen Fracture Treat New Construction Plug and Abandon	Production (Reclamation Recomplete Temporarily		Water Shut-Off Well Integrity Other Surface Commingle Start-Up	
Final Abandonment Notice	Convert to Injection Plug Back Water Disposal		sal			
testing has been completed. Final determined that the site is ready for By request from our Production dep sold through the sales meter is the f PC-1136 Should you have further questions of the sales meter is the formula of the sales meter is the sales meter is the formula of the sales meter is the sales meter	r final inspection.) artment; BP would like to add t uel usage. The fuel usage is al	o the Surface Comminglii located back to each well	ng Start Up Subso based on the we	equent Report: th		
				R	CVD HAR 14'14	
				!	OIL CONS. DIV. DIST. 3	
I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Toya Colvin Toya Colvin			Title Regulatory Analyst			
Signature Juya Co	gli	Date 02/19/20	14			
	THIS SPACE FOR	R FEDERAL OR ST	ATE OFFICE	USE		
Approved by						
Conditions of approval, if any, are attached that the applicant holds legal or equitable to	varrant or certify e which would Office		Date	е		
ntitle the applicant to conduct operations to Fitle 18 U.S.C. Section 1001 and Title 43		e for any person knowingly ar	d willfully to make	to any department of	r agency of the United States any false,	

(Instructions on page 2)

fictitious or fraudulent statements or representations as to any matter within its jurisdiction.